FALL CREEK VALLEY CARE CENTER

344 LINCOLN AVENUE

FALL CREEK 54742 Phone: (715) 877-24	411	Ownership:	Limited Liability Company
Operated from 1/1 To 12/31 Days of Operation	on: 365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/05):	60	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/05):	60	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/05:	58	Average Daily Census:	56

Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)	8			
Primary Diagnosis	%	Age Groups 	*	 Less Than 1 Year 1 - 4 Years	39.7 43.1
Developmental Disabilities	1.7	Under 65	1.7	More Than 4 Years	17.2
Mental Illness (Org./Psy)	20.7	65 - 74	10.3	İ	
Mental Illness (Other)	22.4	75 - 84	36.2	İ	100.0
Alcohol & Other Drug Abuse	0.0	85 - 94	43.1		
Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.6	Full-Time Equivalent	
Cancer	1.7	İ		Nursing Staff per 100 Resid	lents
Fractures	0.0	İ	100.0	(12/31/05)	
Cardiovascular	19.0	65 & Over	98.3		
Cerebrovascular	10.3			RNs	7.1
Diabetes	6.9	Gender	%	LPNs	11.8
Respiratory	1.7			Nursing Assistants,	
Other Medical Conditions	15.5	Male	29.3	Aides, & Orderlies	36.8
	=====	Female	70.7		
	100.0				
			100.0		

Method of Reimbursement

		Medicare 'itle 18			edicaid itle 19			Other			Private Pay	2		amily Care			anaged Care	l		
Level of Care	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	3	7.5	142	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	5.2
Skilled Care	7	100.0	328	37	92.5	122	0	0.0	0	11	100.0	140	0	0.0	0	0	0.0	0	55	94.8
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependen	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	7	100.0		40	100.0		0	0.0		11	100.0		0	0.0		0	0.0		58	100.0

Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services, an	d Activities as of 12/	31/05
Deaths During Reporting Period		 			% Needing		Total
Percent Admissions from:		Activities of	%		sistance of	% Totally	Number of
Private Home/No Home Health	1.7	Daily Living (ADL)	Independent	One	or Two Staff	Dependent -	Residents
Private Home/With Home Health	3.3	Bathing	0.0		77.6	22.4	58
Other Nursing Homes	11.7	Dressing	10.3		75.9	13.8	58
Acute Care Hospitals	73.3	Transferring	25.9		58.6	15.5	58
Psych. HospMR/DD Facilities	0.0	Toilet Use	19.0		51.7	29.3	58
Rehabilitation Hospitals	0.0	Eating	55.2		36.2	8.6	58
Other Locations	0.0	*******	*****	*****	******	******	******
Total Number of Admissions	60	Continence		8	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	al Catheter	3.4	Receiving Resp	iratory Care	17.2
Private Home/No Home Health	16.4	Occ/Freq. Incontinen	t of Bladder	53.4	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	12.7	Occ/Freq. Incontinen	t of Bowel	31.0	Receiving Suct	ioning	1.7
Other Nursing Homes	10.9	į			Receiving Osto	my Care	8.6
Acute Care Hospitals	16.4	Mobility			Receiving Tube	Feeding	1.7
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mech	anically Altered Diets	41.4
Rehabilitation Hospitals	0.0	į -			_	-	
Other Locations	0.0	Skin Care			Other Resident C	haracteristics	
Deaths	30.9	With Pressure Sores		8.6	Have Advance D	irectives	84.5
Total Number of Discharges		With Rashes		8.6	Medications		
(Including Deaths)	55	İ			Receiving Psyc	hoactive Drugs	63.8

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

		Own	ership:	Bed	Size:	Lic	ensure:					
	This	Pro	prietary	50	-99	Ski	lled	Al	1			
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities			
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio			
Occupancy Rate: Average Daily Census/Licensed Beds	93.3	85.8	1.09	86.3	1.08	88.8	1.05	88.1	1.06			
Current Residents from In-County	87.9	81.3	1.08	80.0	1.10	83.2	1.06	77.6	1.13			
Admissions from In-County, Still Residing	33.3	16.8	1.99	18.8	1.77	18.7	1.78	18.1	1.84			
Admissions/Average Daily Census	107.1	216.2	0.50	180.5	0.59	177.7	0.60	162.3	0.66			
Discharges/Average Daily Census	98.2	217.8	0.45	178.7	0.55	179.2	0.55	165.1	0.59			
Discharges To Private Residence/Average Daily Census	28.6	100.9	0.28	87.1	0.33	83.4	0.34	74.8	0.38			
Residents Receiving Skilled Care	100	97.2	1.03	96.4	1.04	96.3	1.04	92.1	1.09			
Residents Aged 65 and Older	98.3	91.5	1.07	93.5	1.05	91.3	1.08	88.4	1.11			
Title 19 (Medicaid) Funded Residents	69.0	61.7	1.12	59.0	1.17	61.8	1.12	65.3	1.06			
Private Pay Funded Residents	19.0	19.4	0.98	24.5	0.77	22.5	0.84	20.2	0.94			
Developmentally Disabled Residents	1.7	0.9	1.98	0.8	2.04	1.1	1.56	5.0	0.35			
Mentally Ill Residents	43.1	28.9	1.49	31.6	1.37	34.8	1.24	32.9	1.31			
General Medical Service Residents	15.5	23.7	0.65	26.1	0.59	23.0	0.67	22.8	0.68			
Impaired ADL (Mean)	48.3	47.9	1.01	47.8	1.01	48.4	1.00	49.2	0.98			
Psychological Problems	63.8	59.1	1.08	57.6	1.11	59.5	1.07	58.5	1.09			
Nursing Care Required (Mean)	11.0	7.1	1.55	7.0	1.57	7.2	1.53	7.4	1.48			